Rate Floor Data

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Block	1 - Contact Infor	mation		B and the second		
ROW#		DATA ELEMENT	•	FORMAT OF REQUESTED DATA	RESPONSE	
1	Carrier Study Area Code			6 numeric digits	351126	3.00 Saladari
2	Carrier Study Area Name			alpha characters	CenturyTel - Che	ester
3	Service Provider Identification Number			9 numeric digits	143001930	0001
4	Residential Local Service Charge Effective Date			mm/dd/yyyy	6/1/2014	
5	Contact Name			alpha characters	Ken Buchan	
6	Contact Telephone Number (include area code)			9 numeric digits	(318) 362-1538	
7	Sheet number			numeric digit(s)	1	
8	Total Number of Sheets			numeric digit(s)	1	
	Column 1 Residential Local	Column 2 State Subscriber	2 - Residential I Column 3 State Universal	Column 4 Mandatory	Column 5	Liñe Counts
	Service Charge	Line Charge	Service Fee	Extended Area Service Charge		
9	\$ 18.00	. NA	NA_	NA		
10	\$ 18.00	NA	NA	NA		
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TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING RATE FLOOR DATA ON ITS OWN BEHALF:

Certification of	Officer as to the Accuracy of the Data Reported fo	or the Rate Floor Data
I certify that I am an officer of the represented; and, to the best of my kno	porting carrier; my responsibilities include ensuring the acc wledge, the information reported on this form is accurate.	euracy of the actual rate floor data
Name of Reporting Carrier: CenturyTel of Ch	nester, Inc. d/b/a CenturyLink	
Signature of authorized officer:	PB	Date 6/20/14
Printed name of authorized officer: David D. Co	le	
Title or position of authorized officer: Executive	vice President of Operations Support and Controller	
Title or position of authorized officer: Executive \ Telephone number of authorized officer: (318)	AC MORC	